

U.S.DepartmentofHousingandUrbanDevelopment  
OfficeofPublicandIndianHousing

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SmallPHAPlanUpdate  
AnnualPlanforFiscalYear:     **2002**

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**



**PHA Plan FY2002  
Agency Identification**

**PHAName:** CovertPublicHousingCommission

**PHANumber:** MI189

**PHAFiscalYearBeginning:(mm/yyyy)** 07/2002

**PHA Plan Contact Information:**

Name: Ram onaBoone

Phone: 616 -764-8881

TDD: 800 -649-3777

Email(if available): rboone@i2k.com

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- ☒ Main administrative office of the PHA  
☐ PHA development management offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA  
☐ PHA development management offices  
☐ Main administrative office of the local, county or state government  
☐ Public library  
☐ PHA website  
☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA  
☐ PHA development management offices  
☐ Other (list below)

**PHA Programs Administered :**

- ☐ Public Housing and Section 8      ☐ Section 8 Only      ☒ Public Housing Only



# Annual PHA Plan Fiscal Year 2001

[24CFR Part 903.7]

## i. Table of Contents

Provide a table of contents for the PHA Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

<b>Contents</b>	<b><u>Page#</u></b>
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## **ii.ExecutiveSummary**

[24CFRPart903.79(r)]

AtPHAoption,provideabriefoverviewoftheinformationintheAnnualPlan

### **1.SummaryofPolicyorProgramChangesfortheUpcomingYear**

Inthissection,brieflydescribechangesinpoliciesorprogramsdiscussedinlastyear'sPHAPlanthatarenotcoveredinothersectionsofthis Update.

TheHousingCommissionis scheduledwithitsPlan.It has updated and implemented its policies in compliance with the Quality Housing and Work Responsibility Act of 1998 and has added another year to the five year Capital Fund Plan FY 2006. Additionally the Housing Commission has determined it is in compliance with HUD's deconcentration guidelines since the Housing Commission has only one development with 40 units. The Housing Commission completed its voluntary conversion of public housing analysis and determined it is best and most economical to keep its 40 units as public housing.

### **2.CapitalImprovementNeeds**

[24CFRPart903.79(g)]

Exemptions:Section 8onlyPHAsarenotrequiredto completethis component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 58,559

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

#### **(1)CapitalFundProgram5 -YearActionPlan**

The Capital Fund Program 5 -Year Action Plan is provided as Attachment C

#### **(2)CapitalFundProgramAnnualStatement**

The Capital Fund Program Annual Statement is provided as Attachment B

### **3.D emolitionandDisposition**

[24CFRPart903.79(h)]

Applicability:Section 8onlyPHAsarenotrequiredto completethis section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

## 2. Activity Description

<b>Demolition/Disposition Activity Description</b> (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

## 4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (complete questions for each program identified.)

### **B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum home owner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

## **5. Safety and Crime Prevention: PHDEP Plan**

[24CFR Part 903.7(m)]

Exemptions Section 8 Only PHAs may skip to the next component. If a PHA is eligible for PHDEP funds, it must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? A

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_

C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

## **6. Other Information**

[24CFR Part 903.79(r)]

### **A. Resident Advisory Board (RAB) Recommendations and PHA Response**

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment (Filename) \_\_\_\_\_

3. In what manner did the PHA address those comments? (select all that apply)

☐ The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included \_\_\_\_\_

☐ Yes ☐ No: below or

☐ Yes ☐ No: at the end of the RAB Comments in Attachment \_\_\_\_\_.

☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comment Attachment \_\_\_\_\_.

☒ Other: (list below) The Authority developed the Draft FY2002 Plan in close concert with the RAB; therefore the RAB comments were considered and incorporated in every step of the process. Throughout the year the Authority meets with the RAB to discuss current and upcoming FY Plans, policies, procedures and Authority activities.



## B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☒ Other: (list below)
  - Preserve existing housing stock

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

- Provide technical assistance upon request

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

### A. Substantial Deviation from the 5-year Plan:

#### GOALS

- Additions or deletions of Strategic Goals

## **B. Significant Amendment or Modification to the Annual Plan:**

### **PROGRAMS**

- Any change with regard to demolition or disposition, designation of housing, homeownership programs or conversion activities

### **CAPITAL BUDGET**

- Addition of non-emergency work items in excess of \$5,000 (item not included in the current Annual Statement or Five Year Action Plan) or change in use of replacement reserve funds in excess of \$5,000.

### **POLICIES**

- Change to rent or admissions policies or organization of the waiting list

An exception to the above definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements since such changes are not considered significant amendments by HUD.

## **Attachment A**

### **Supporting Documents Available for Review**

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
<b>X</b>	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
<b>X</b>	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
<b>X</b>	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
<b>X</b>	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
<b>X</b>	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
<b>X</b>	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99 -52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
<b>X</b>	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plans for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
<b>X</b>	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
<b>X</b>	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
<b>X</b>	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

<b>Annual Statement/Performance and Evaluation Report      ATTACHMENT B</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> Covert Public Housing Commission		<b>Grant Type and Number</b> Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2002
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$58,559			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$58,559			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

<b>Annual Statement/Performance and Evaluation Report</b>						<b>ATTACHMENT B</b>									
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>															
<b>PHAName:</b> Covert Public Housing Commission				<b>Grant Type and Number</b> Capital Fund Program: Capital Fund Program Replacement Housing Factor Grant No:						<b>Federal FY of Grant:</b> 2002					
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>												<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>												<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
<b>Line No.</b>	<b>Summary by Development Account</b>				<b>Total Estimated Cost</b>				<b>Total Actual Cost</b>						
24	Amount of line 20 Related to Energy Conservation Measures														

## PartII:SupportingPages

[illegible]



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Covert Public Housing Commission			Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2002
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Fund sExpended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MI189-01	9/2003			9/2004			

## ATTACHMENT C

### Capital Fund Program Five - Year Action Plan

#### Part I: Summary

PHANameCovertPublicHousing Commission				<input checked="" type="checkbox"/> <b>Original 5 - Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA- Wide	Year1	WorkStatementforYear2 FFYGrant:2003 PHAFY:2003	WorkStatementforYear3 FFYGrant:2004 PHAFY:2004	WorkStatementforYear4 FFYGrant:2005 PHAFY:2005	WorkStatementforYear5 FFYGrant:2006 PHAFY:2006
MI189 -01	Annual Statement	\$58,559	\$58,559	\$58,559	\$58,559
Operations					
MgtImprovements					
Administration					
FeesandCosts					
TotalCFPFunds (Est.)		\$58,559	\$58,559	\$58,559	\$58,559
TotalReplacement HousingFactorFunds					

**CapitalFundProgramFive -YearActionPlan**  
**PartII:SupportingPages —WorkActivities**

Activitiesfor Year1	ActivitiesforYear: _2____ FFYGrant:2003 PHAFY:2003			ActivitiesforYear: __3 FFYGrant:2004 PHAFY:2004		
	DevelopmentNumber/WorkDescription	Quantity	Cost	DevelopmentNumber /WorkDescription	Quantity	Cost
	1460ReplaceHVACsystemsinfamilyunits	12DU	58,559	1460Replacehotwaterheatersinfamilyunits	10DU	5,000
				1460Replaceclosetdoorsinfamilyunits	12DU	18,000
				1460AddACtofreshairmake -upu nitinSenior Building	LS	10,000
				1460NewlightedsignforSeniorBuilding	LS	5,000
				1460Replacecountertops/sinksandrepair cabinetsasrequiredinfamilyunits	12DU	20,559

**Capital Fund Program Five-Year Action Plan**  
**Part II: Supporting Pages — Work Activities**

Activities for Year 1	Activities for Year: __4__ FFY Grant: 2005 PHA FY: 2005			Activities for Year: __5__ FFY Grant: 2006 PHA FY: 2006		
	Development Number/Work Description	Quantity	Cost	Development Number/Work Description	Quantity	Cost
	1460 Replace countertops/sinks and repair cabinets as required in Senior Building	28 DU	42,000	1460 Add storage area to family units	12 DU	36,000
	1450 Landscape around Senior Building	LS	16,559	1460 Replace/repair floors in family units	12 DU	22,559

**Required Attachment\_D\_\_:Resident Member on the PHA Governing Board**

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: Eugene Crawford

B. How was the resident board member selected: (select one)?

☐ Elected

☒ Appointed

C. The term of appointment is (include the date term expires): Five year term expires on June 12, 2006

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☐ Other (explain):

B. Date of next term expiration of a governing board member : May 2003

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Covert Township Board, Wayne Rendell Township Supervisor

**Required Attachment \_\_\_E\_\_\_: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Dale Smith  
P.O. Box 66 Apt. 1 3  
Covert, MI 49043

Charlene Wenckowski  
P.O. Box 66 Apt. 1  
Covert, MI 49043

# **ATTACHMENTG**

**Covert Public Housing Commission  
P. O. Box 66  
Covert , MI 49043  
Phone 616-764-8881**

## **CERTIFICATION OF VOLUNTARY CONVERSION OF PUBLIC HOUSING DEVELOPMENTS**

**June 10, 2002**

The Covert Public Housing Commission hereby certifies that it has:

- Reviewed its one development's operation as public housing;
- Considered the implications of converting the one public housing development to tenant based assistance; and
- Concluded that conversion of the one developments will be inappropriate because removal of the development will not meet the necessary conditions for voluntary conversions since:
  - 1) Converting to tenant based assistance will cost more to operate the development than as public housing. The residents and community overwhelmingly prefers the current public housing over tenant based assistance;
  - 2) Residents and the community will benefit more by keeping the developments as public housing rather than converting to tenant based assistance; and
  - 3) Converting to tenant based assistance will adversely affect the availability of affordable housing in the City of Covert, MI.

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Ramona Boone, Executive Director

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Date

## ATTACHMENTG

### Component10(B)VoluntaryConversionInitialAssessments

- a. HowmanyofthePHA'sdevelopmentsaresubjecttotheRequiredInitial Assessments? **Onedevelopment**
- b. HowmanyofthePHA'sdevelopmentsarenotsubjecttotheRequiredInitial Assessmentsbasedonexemptions(e.g.,elderlyand/ordisableddevelopments notgeneraloccupancyprojects)? **None**
- c. HowmanyAssessmentswereconductedforthePHA'scovered developments? **One**
- d. IdentifyPHAdevelopmentsthatmaybeappropriateforconversionbasedonthe RequiredInitialAssessments: **None**

DevelopmentName	NumberofUnits

- d. IfthePHAhasnotcompletedtheRequiredInitialAssessments,describethe statusoftheseassessments: **Theassessmentiscomplete**



## **AttachmentF**

### **Covert Public Housing Commission**

**P. O. Box 66  
Covert, MI 49043  
Phone 616-764-8881**

### **CERTIFICATION OF DECONCENTRATION AND INCOME MIXING**

**June 10, 2002**

The Covert Public Housing Commission hereby certifies that it has only one development MI189-01 with 28 elderly and 12 family units and therefore is not covered by the deconcentration and income mixing requirements.

---

Ramona Boone, Executive Director

Date

## AttachmentF

### **(6)DeconcentrationandIncomeMixing**

- a. ☐ Yes ☒ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

**NOTE: The Housing Commission has only one development**

- b. ☐ Yes ☐ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name :	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

## Attachment F

# COVERT PUBLIC HOUSING COMMISSION DECONCENTRATION POLICY

### **PUBLIC HOUSING:**

In an ongoing effort for the Housing Commission to meet or exceed the laws and regulations regarding its public housing programs, the following Deconcentration Policy has been developed in order to comply with the Quality Housing and Work Responsibility Act of 1998, Section 513.

**INCOME MIX TARGETING:** To meet the requirements of the Act and subsequent HUD regulations, at least 40 percent of families admitted to public housing by the Housing Commission must have incomes that do not exceed 30% of the area median. If 40% or more of the Housing Commission families occupy units whose incomes do not exceed 30% of the area median income, this requirement shall be considered as being met.

**PROHIBITION OF CONCENTRATION OF LOW-INCOME FAMILIES:** The Housing Commission will not, in meeting this income mix targeting, concentrate very low-income families, or other families with relatively low incomes, in public housing units in certain areas or certain buildings. The Housing Commission will review the income and occupancy characteristics of the buildings in its development to ensure that a low-income concentration does not occur.

**DECONCENTRATION:** The Housing Commission will make every effort to deconcentrate families of certain income characteristics within the Commission development. To achieve this, the Housing Commission will offer incentives for eligible families having higher incomes to occupy dwelling units in areas predominantly occupied by eligible families having lower incomes, and provide for occupancy of eligible families having lower incomes in areas predominantly occupied by eligible families having higher incomes. Incentives by the Housing Commission allow for the eligible family to have the sole discretion in determining whether to accept the incentive and the Housing Commission will not take any adverse action toward any eligible family for choosing not to accept these incentives. The skipping of a family on the waiting list to reach another family to implement this Deconcentration Policy shall not be considered an adverse action. As such, the Housing Commission will continue to accept application and place

## **Attachment F**

the individualsonawaitinglist. Selectionwillbemadebasedonacombinationofthe localpreferencesandanincometargetmix.

TheHousingCommissionwilltracktheincomemixwithineachareaas aneffortto avoidaconcentrationofhigherorlowerincomefamiliesinanyonearea.

Monitoringwillbeconductedtoconfirmthatatleastforty(40)percentof allleasedunitswillbewithinthirty(30)percentofmedianincome.

Efforts throughmarketingandoutreachshallbemadetoincreasethenumberoffamilies withincomesgreaterthanthirty(30)percentofmedianincomeintheareasnotedabove inordertoavoidconcentrationsofverylow -incomefamiliesinoneareaasperthe requirementsoftheQHWRAof1998.

# ATTACHMENTH

<b>AnnualStatement/PerformanceandEvaluationReport</b>					
<b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary</b>					
<b>PHAName:</b> CovertPublicHousingCommission		<b>GrantTypeandNumber</b> CapitalFundProgram: <b>MI133P18950101</b> CapitalFundProgram ReplacementHousingFactorGrantNo:			<b>FederalFYofGrant:</b> <b>2001</b>
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno:    ) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <input type="checkbox"/> FinalPerformanceandEvaluationReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	2,000		0	0
3	1408ManagementImprovements	2,000		0	0
4	1410Administ ration				
5	1411Audit				
6	1415liquidatedDamages				
7	1430FeesandCosts	9,000		0	0
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingStructures				
11	1465.1DwellingEquipment —Nonexpendable				
12	1470Nondwelling Structures	48,512		0	0
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1498ModUsedforDevelopment				
19	1502Contingency				
20	AmountofAnnualGrant:(sumoflines2 -19)	\$61,512		0	0
21	Amountofline20RelatedtoLBPActivities				
22	Amountofline20RelatedtoSection504Compliance				

**ATTACHMENTH**

<b>AnnualStatement/PerformanceandEvaluationReport</b>					
<b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary</b>					
<b>PHAName:</b> CovertPublicHousingCommission		<b>GrantTypeandNumber</b> CapitalFundProgram: MI133P18950101 CapitalFundProgram ReplacementHousingFactorGrantNo:			<b>FederalFYofGrant:</b> 2001
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno:    ) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <input type="checkbox"/> FinalPerformanceandEvaluationReport					
<b>Line No.</b>	<b>SummarybyDevelopmentAccount</b>	<b>TotalEstimatedCost</b>		<b>TotalActualCost</b>	
23	Amountoffline20RelatedtoSecurity				
24	Amountoffline20RelatedtoEnergyConservation Measures				

**ATTACHMENTH**

<b>AnnualStatement/PerformanceandEvaluationReport</b> <b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)</b> <b>PartII:SupportingPages</b>								
<b>PHAName:</b> CovertPublicHousingCommission		<b>GrantTypeand dNumber</b> CapitalFundProgram#: CapitalFundProgram ReplacementHousingFactor#:				<b>FederalFYofGrant: 2001</b>		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		2,000				In-progress
	ManagementImprovements	1408		2,000	2			In-progress
	A&EFees	1430		4,500				In-progress
	ProjectManagement/Consultant	1430		4,500				In-progress
	Roofingandsidingrepair	1460		48,512				In-progress

**ATTACHMENT**

## Annual Statement/Performance and Evaluation Report

**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)**

## PartIII:ImplementationSchedule

[illegible]



# ATTACHMENT I

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> Covert Public Housing Commission		<b>Grant Type and Number</b> Capital Fund Program: <b>MI133P18950100</b> Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2000</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations	60,529	2,000	0	0
3	1408 Management Improvements	0	2,000	0	0
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	0	9,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Non dwelling Structures	0	47,529	0	0
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 - 19)	60,529	60,529	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				

**ATTACHMENT I**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> Covert Public Housing Commission		<b>Grant Type and Number</b> Capital Fund Program: MI133P18950100 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:      )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

## ATTACHMENTI

**AnnualStatement/PerformanceandEvaluationReport  
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)  
PartII:SupportingPages**

[illegible]

## ATTACHMENTI

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

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